PAGE 1 / 19

Image# 201601299004711333

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An Autr	norized Committee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
THEATRICAL PROTECT	ΓΙVE UNION LOCAL N	NO ONE IATSE NEW YO	RK CITY STA	AGEHANDS PAC INC
ADDRESS (number and street)	320 WEST 46TH STREET			
Check if different				
than previously reported. (ACC)	NEW YORK		NY L	10036
2. FEC IDENTIFICATION NU	MBER ▼ CIT	YA	STATE A	ZIP CODE A
C C00325639		S THIS EPORT X (N) OR	AME (A)	NDED
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M5		Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M6)	Sep 20	(Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7)	Oct 20	Jan 31 (YE)
Quarterly Report (Q July 15	(c) 12-Day PRE-Election	Primary (12P)	General (1	2G) Runoff (12R)
Quarterly Report (Q: October 15	Report for the:	Convention (12C)	Special (12	2S)
Quarterly Report (Q	3)	M M / D D /	Y Y Y Y	in the
X January 31 Year-End Report (YI	E) Election	n on		State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30	R) Special (30S)
Termination Report (TER)	Election	n on	Y Y Y Y Y	in the State of
5. Covering Period 07			31	2015
I certify that I have examined thi	s Report and to the best of	my knowledge and belief it is t	rue, correct and	complete.
Type or Print Name of Treasurer	ROBERT MCDONOUGH			
Signature of Treasurer ROBE	ERT MCDONOUGH	[Electronically Filed]	Date 01	29 / 2016
NOTE: Submission of false, errone	ous, or incomplete information	n may subject the person signing	this Report to the	penalties of 2 U.S.C. §437g.
Office				FEC FORM 3X
Use Only				Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS
FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

THEATRICAL PROTECTIVE UNION LOCAL NO ONE IATSE NEW YORK CITY STAGEHANDS PAC INC

Page 2

01 2015 Report Covering the Period: 07 2015 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 8034.15 January 1, 2015 (b) Cash on Hand at 14768.79 Beginning of Reporting Period..... 13243.33 6358.14 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 21126.93 21277.48 6(a) and 6(c) for Column B)..... 5933.84 6084.39 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 15193.09 15193.09 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

THEATRICAL PROTECTIVE UNION LOCAL NO ONE IATSE NEW YORK CITY STAGEHANDS PAC INC

I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	1385.00	2270.00
(i) Itemized (use Schedule A)	7 7	
(ii) Unitemized	4965.00	10962.00
(iii) TOTAL (add	, J.	7 7
Lines 11(a)(i) and (ii)▶	6350.00	13232.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		40000.00
Totals to Line 33, page 5)	6350.00	13232.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
6. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
i. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	8.14	11.33
3. Transfers from Non-Federal and Levin Funds	0.14	11.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii i unus (iioiii ochedule 113)	7 7	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(5) 101111 10110 (1111 10(4)) 11111 10(4))		
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	6358.14	13243.33
Total Endoral Pagainta		
. Total Federal Receipts	6250 11	12042 22
(subtract Line 18(c) from Line 19)▶	6358.14	13243.33

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
	(i) Federal Share	0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
	(b) Other Federal Operating		7 7 7		
	Expenditures	207.34	357.89		
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	207.34	357.89		
22.	Transfers to Affiliated/Other Party	, , ,	3		
22	Contributions to	0.00	0.00		
	Contributions to Federal Candidates/Committees and Other Political Committees	1000.00	1000.00		
24.	Independent Expenditures	0.00	0.00		
25.	(use Schedule E)	3.00	0.00		
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
26	Loan Repayments Made	0.00	0.00		
Ο.	содн пераушень масе		3.00		
27.	Loans MadeRefunds of Contributions To:	0.00	0.00		
.0.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	man i ontical committees	0.00			
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	,				
	(d) Total Contribution Refunds	0.00	0.00		
	(add Lines 28(a), (b), and (c))▶	7 7	0.00		
29.	Other Disbursements	4726.50	4726.50		
80.	Federal Election Activity (2 U.S.C. §431(20))				
	(a) Allocated Federal Election Activity				
	(from Schedule H6) (i) Federal Share	0.00	0.00		
	(i) i ederal offare				
	(ii) "Levin" Share	0.00	0.00		
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
	(c) Total Federal Election Activity (add				
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
31.	Total Disbursements (add Lines 21(c), 22,				
-	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5933.84	6084.39		
32.	Total Federal Disbursements				
<i>ι</i>	(subtract Line 21(a)(ii) and Line 30(a)(ii)				
	from Line 31)	5933.84	6084.39		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	6350.00	13232.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6350.00	13232.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	207.34	357.89
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	207.34	357.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE		6	OF	19	
ı	(check only one)								
	X 1	1a	11b		11c		12		
	1	3	14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

NAME OF COMMITTEE (In Full)		solicit contributions from such committee.
> THEATRICAL PROTECTIVE UNIO	N LOCAL NO ONE IATSE NEW YORK	CITY STAGEHANDS PAC INC
Full Name (Last, First, Middle Initial) RONALD BURNS Jr.		Date of Receipt
Mailing Address 6279 AUSTIN STREET		09 30 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.8781
REGO PK	NY 11374	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
Shubert Theater	Stagehand	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. 193. ogalo 10a. to 2010 V	
Other (specify) ▼	265.00	
Full Name (Last, First, Middle Initial) RONALD BURNS Jr.		Date of Receipt
Mailing Address 6279 AUSTIN STREET		10 22 2015 _
City	State Zip Code	Transaction ID : SA11AI.8782
REGO PK	NY 11374	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	40.00
Name of Employer	Occupation	
Shubert Theater	Stagehand	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	305.00	
Full Name (Last, First, Middle Initial)		
. VICTOR DIZ		Date of Receipt
Mailing Address 39-77 65TH PLACE		08 14 2015
City WOODSIDE	State Zip Code NY 11377	Transaction ID : SA11AI.8801 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer	Occupation	
NBC	Stagehand	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	600.00	
		765.00
SUBTOTAL of Receipts This Page (optional)	_	700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	_	: PA	GE 7	OF	19
(check onl	y one)				
X 11a	11b	11c	12	2	
13	14	15	16	3	17

or for commercial purposes, other than usin	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) THEATRICAL PROTECTIVE UN	IION LOCAL NO ONE IATSE NEW YOR	K CITY STAGEHANDS PAC INC
Full Name (Last, First, Middle Initial) ANTHONY J MANNO		Date of Receipt
Mailing Address 32 CEDARLAWN BLVD		07 14 2015
City	State Zip Code	Transaction ID : SA11AI.8823
VALLEY STREAM	NY 11580	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer	Occupation	-
TPU Local One Union	Stagehand	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	295.00	
Full Name (Last, First, Middle Initial) ANTHONY J MANNO	'	Date of Receipt
Mailing Address 32 CEDARLAWN BLVD		M = M / D = D / Y = Y = Y
City	State Zip Code	07 17 2015
VALLEY STREAM	NY 11580	Transaction ID : SA11AI.8824 Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Lacif Necespt tills Fellod
federal political committee.	[C]	125.00
Name of Employer TPU Local One Union	Occupation	
	Stagehand	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	, 420.00	
Full Name (Last, First, Middle Initial) ANTHONY J MANNO	·	Date of Receipt
Mailing Address 32 CEDARLAWN BLVD		08 03 2015
City VALLEY STREAM	State Zip Code NY 11580	Transaction ID : SA11AI.8825 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer	Occupation	_
TPU Local One Union	Stagehand	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	455.00	
SUBTOTAL of Receipts This Page (optional	al)	290.00
COLUMN TAGO (OPHONE	<u> </u>	
TOTAL This Period (last page this line nun	nber only)	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	8	OF	19		
	(cł	ne	ck only	or	ne)					
		X	11a		11b		11c	12		
			13		14		15	16	;	17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) THEATRICAL PROTECTIVE UNION	N LOCAL NO ONE IATSE NEW YORK	CITY STAGEHANDS PAC INC
Full Name (Last, First, Middle Initial) ANTHONY J MANNO Mailing Address 32 CEDARLAWN BLVD		Date of Receipt
City	State Zin Code	09 14 2015
City VALLEY STREAM	State Zip Code NY 11580	Transaction ID : SA11AI.8826
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00
Name of Employer	Occupation	
TPU Local One Union	Stagehand	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) 3. ANTHONY J MANNO		Date of Receipt
Mailing Address 32 CEDARLAWN BLVD		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	09 15 2015 Transaction ID : SA11Al.8827
VALLEY STREAM	NY 11580	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer TPU Local One Union	Occupation Stagehand	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00	
Full Name (Last, First, Middle Initial) C. ANTHONY J MANNO		Date of Receipt
Mailing Address 32 CEDARLAWN BLVD		09 28 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.8828
VALLEY STREAM	NY 11580	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
TPU Local One Union	Stagehand	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	535.00	
SUBTOTAL of Receipts This Page (optional)		80.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE		9	OF		19		
	(check only one)										
	×	11a		11b		11c		12			
		13		14		15		16	,		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THEATRICAL PROTECTIVE UN	NION LOCAL NO ONE IATSE NEW YORK	CITY STAGEHANDS PAC INC
Full Name (Last, First, Middle Initial) JONATHAN MONT		Date of Receipt
Mailing Address 616 9TH AVE		11 20 2015
City	State Zip Code	Transaction ID : SA11AI.8838
E NORTHPORT	NY 11731	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
Various	Stagehand	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial) 3. ROBERT TERZI	'	Date of Receipt
Mailing Address 93 W 12TH ST FL2		10 08 2015
City	State Zip Code	Transaction ID : SA11AI.8870
BAYONNE	NJ 07002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	-
Various	Stagehand	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (options	al)	250.00
TOTAL This Period (last page this line nur	mber only)	1385.00

SC	CHEDULE B (FEC Form 3X)			FOR	1 1617		· · ·			PΔGI	E 10	OF 19
	EMIZED DISBURSEMENTS		rate schedule(s)		LINE I	NUMBEF one)	1.			Li Adi	_ 10	01 13
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		Detailed	Summary Page		27	28a		28b		28c	29	30k
An	y information copied from such Reports and Staten	nents may r	not be sold or us	sed by an	y perso	on for the	pur	pose (of so	liciting	contrib	utions
	for commercial purposes, other than using the nam											
	NAME OF COMMITTEE (In Full)											
$ \rangle$	THEATRICAL PROTECTIVE UNION LC	CAL NO	ONE IATSE	NEW Y	ORK	CITY S	AT8	GEH.	ANI	OS PA	C IN	2
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	Mailing Address 2700 Coast Ave					08	VI /	1	_	/ Y	2015	" Y
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	Purpose of Disbursement Credit card processing fee.			001		Δμοιν	nt of	Fach	Dieh	ourseme	ant thic	Period
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	Sandado Harrio			Catego Type				, T			1	9.45
	Office Sought: House Disbursen	nent For:		.,,,,				,				
		Primary	General									
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_	Full Name (Last, First, Middle Initial)					_						
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	President	Other (spec	cify) 🔻									
_	State: District:											
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	Mountain View	CA	94043			iran	sact	ion ID	: SE	321B.89	1 04	
	Purpose of Disbursement Credit card processing fee.				$\neg \top$							
	Candidate Name			001		Amou	nt of	Each	Disb	ourseme	ent this	Period
	Candidate Name			Catego								2.99
	Office Sought: House Disbursen	nent For		Туре	,		-	7	-	7		
	Senate	Primary	General									
	President	Other (spec										
	State: District:		*									
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s	UBTOTAL of Disbursements This Page (optional)				•			7		,	2	3.33
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S	CHEDULE B (FEC Form 3X)			FOR LINE	NII INADED			PAGE	<u> </u>	OF 19
	EMIZED DISBURSEMENTS	Use sepa	arate schedule(s)	FOR LINE (check only				LIAGE		01 10
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	y information copied from such Reports and Staten for commercial purposes, other than using the nam									
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\	NAME OF COMMITTEE (In Full)		ONE ! . = C =	NEWYSCE	01777	- A C =:			 .	_
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	,	State CA	Zip Code		Trans	action II) : SB	21B.89	05	
	Mountain View Purpose of Disbursement	UA .	94043							
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	Candidate Name			Category/					1	9.95
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	Office Sought: House Disbursen									
		Primary	General							
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_	Full Name (Last, First, Middle Initial)									
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	Mailing Address 2700 Coast Ave				09	┛╙	10		2015	
	,	State	Zip Code		Trans	saction II) : SE	321B.89	906	
	Mountain View	CA	94043							
	Purpose of Disbursement Credit card processing fee.			201			. .			Desit 1
	, ,			001	Amoun	t of Each	Disb	urseme	ent this	Period
	Candidate Name			Category/						2.41
				Type		7	-	7		2.71
	Office Sought: House Disbursen	nent For:								
		Primary	General							
		Other (spec	cify) 🔻							
_	State: District:									
	Full Name (Last, First, Middle Initial)									
C.	Intuit				Date of	f Disburs	emen	t		
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	Mailing Address 2700 Coast Ave				09		16	1.	2015	
	City	State	Zip Code		Trans	saction II) - 95	21R 90	907	
		CA	94043		iiails	acaon II	. 36	,	,01	
	Purpose of Disbursement									
	Credit card processing fee.			001	Amoun	t of Each	Disb	urseme	ent this	Period
	Candidate Name			Category/			_			1.07
				Type		1 4				1.37
	Office Sought: House Disbursen	nent For:				,		,		
	Senate	Primary	General							
	President	Other (spec	cify) 🔻							
	State: District:									
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١	UBTOTAL of Disbursements This Page (optional)					_	_		2	3.73
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SC	CHEDULE B (FEC Form 3X)			FOR LIN	_ N	INADED				PΔGI	= 12	OF 19
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 16 OF 19
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Criccic Orin)		
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Any information copied from such Reports and Stat	ements may not be sold or us			
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NAME OF COMMITTEE (In Full)				
$ \; angle$ THEATRICAL PROTECTIVE UNION I	OCAL NO ONE IATSE	NEW YORK	CITY STAGEHA	NDS PAC INC
Full Name (Last, First, Middle Initial)			Ī	
A. Intuit			Date of Disbursen	nent
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Mailing Address 2700 Coast Ave			12 07	2015
City	State Zip Code			
Mountain View	CA 94043		Transaction ID :	SB21B.8919
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Candidate Name		001	Amount of Each D	Disbursement this Period
Candidate Name		Category/ Type		1.85
Office Sought: House Disburs	ement For:	1,700		7
Senate	Primary General			
President	Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
B. Intuit			Date of Disbursen	nent
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Mailing Address 2700 Coast Ave			12 10	2015
City	State Zip Code		Transaction ID :	SB21B.8921
Mountain View Purpose of Disbursement	CA 94043			
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Candidate Name		Category/		1.53
Office Coughts House		Type		1.00
Office Sought: House Disburs Senate	ement For: Primary General			
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
C. Intuit			Date of Disbursen	
Mailing Address 2700 Coast Ave			12 14	
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City Mountain View	State Zip Code CA 94043		Transaction ID :	SB21B.8922
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Candidate Name		Category/		3.13
Office Sought: House Disburs	ement For:	Туре		7
Senate	Primary General			
President	Other (specify) ▼			
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		27	28a 28b	28c 29 30b
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NAME OF COMMITTEE (In Full)				
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Full Name (Last, First, Middle Initial)				
A. Intuit			Date of Disbursem	nent
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Mountain View	CA 94043		Transaction ID:	3DZTB.8923
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		Type		3.93
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Senate	Primary General			
President	Other (specify) ▼			
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	Primary General			
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 18 OF 19
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NAME OF COMMITTEE (In Full)				
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Full Name (Lock First Middle Lift)				
Full Name (Last, First, Middle Initial) A. FRIENDS OF CLYDE WILLIAMS			Date of Disbursemer	nt
- I MENDS OF GLIDE WILLIAMS			M M / D D	/ Y Y Y Y
Mailing Address PO BOX 757			11 19	2015
City	State Zin Code			
,	State Zip Code NY 10026		Transaction ID : SI	323.8887
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Office Sought: Y House Disbursem	pont For: 0040	Туре		1000.00
	nent For: 2016 Primary Seneral			
	Other (specify) ▼			
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Full Name (Last, First, Middle Initial)				
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Office Sought: House Disbursem				
	Primary General Other (specify)			
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SCHEDULE B (FEC Form 3X)	1		FOR LINE	NUMBER:	PAGE 19 OF 19
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NAME OF COMMITTEE (In Full) THEATRICAL PROTECTIVE UNION L	OCAL NO ONE	IATSE N	EW YORK	CITY STAGEHAN	DS PAC INC
/ Full Name (Last, First, Middle Initial)					
A. HILLSTAR PROMOTION LTD.				Date of Disbursemen	nt
Mailing Address 4400 MANOR LANE				10 / 29	2015
City	State Zip Co	nde			
HAMBURG	NY 14075			Transaction ID : SI	329.8892
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Candidate Name			003	Amount of Each Dis	oursement this Period
Candidate Name			Category/ Type		1864.06
Office Sought: House Disburse Senate	ement For:	General	71	,	,
President	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) B. HILLSTAR PROMOTION LTD.				Date of Disbursemen	nt
Mailing Address 4400 MANOR LANE				12 / 11	2015
City HAMBURG	State Zip Co NY 14075			Transaction ID : S	B29.8893
Purpose of Disbursement			003	Amount of Each Dis	oursement this Period
Candidate Name			Category/ Type	, , , , , , ,	1078.50
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Office Sought: House Disburse Senate President State: District:		General			
Senate President State: District: Full Name (Last, First, Middle Initial)	Primary G	General			
Senate President State: District:	Primary G	General		Date of Disburseme	
Senate President State: District: Full Name (Last, First, Middle Initial)	Primary G	General		Date of Disbursement	nt / Y Y Y Y Y 2015
Senate President State: District: Full Name (Last, First, Middle Initial) C. TONI EMBROIDERY Mailing Address 475 BROADWAY City	Primary ☐ G Other (specify) ▼ State Zip Co	ode		M M / D D	2015
Senate President State: District: Full Name (Last, First, Middle Initial) C. TONI EMBROIDERY Mailing Address 475 BROADWAY City WESTWOOD	Primary ☐ G Other (specify) ▼	ode		10 / 21	2015
Senate President State: District: Full Name (Last, First, Middle Initial) C. TONI EMBROIDERY Mailing Address 475 BROADWAY City	Primary ☐ G Other (specify) ▼ State Zip Co	ode	003	Transaction ID : S	2015
Senate President State: District: Full Name (Last, First, Middle Initial) C. TONI EMBROIDERY Mailing Address 475 BROADWAY City WESTWOOD	Primary ☐ G Other (specify) ▼ State Zip Co	ode 5	003 Category/ Type	Transaction ID : S	2015
Senate President State: District: Full Name (Last, First, Middle Initial) C. TONI EMBROIDERY Mailing Address 475 BROADWAY City WESTWOOD Purpose of Disbursement Candidate Name	Primary G Other (specify) ▼ State Zip Co NJ 07675	ode 5	Category/	Transaction ID : S	2015 329.8891 Dursement this Period
Senate President District: Full Name (Last, First, Middle Initial) C. TONI EMBROIDERY Mailing Address 475 BROADWAY City WESTWOOD Purpose of Disbursement Candidate Name Office Sought: House Senate	Primary G Other (specify) ▼ State Zip Co NJ 07675 ement For: Primary G	ode 5	Category/	Transaction ID : S	2015 329.8891 Dursement this Period
Senate President District: Full Name (Last, First, Middle Initial) C. TONI EMBROIDERY Mailing Address 475 BROADWAY City WESTWOOD Purpose of Disbursement Candidate Name Office Sought: House Senate President	Primary G Other (specify) ▼ State Zip Co NJ 07675 ement For: Primary G Other (specify) ▼	ode 5 General	Category/ Type	Transaction ID : S	2015 329.8891 Dursement this Period